Littleton

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APR - 1 2015

CITY CLERK

REPORT OF CONTRIBUTIONS AND EXPENDITURES (1-45-108, C.R.S.)

Full Name of Committee/Person: Your Littleton - Your Vote				
As Shown On Registration Address of Committee/Person: FS 71 C 1 C C C C C C C C				
95 14 3 MUVOY 1 51				
City, State & Zip Code: Diff leton (0 80120				
Committee Type: \\ \(\sum_{\text{SSUC}} \)				
Name and Address of Financial Colo Bus Bank 2409 main St Co 80120	0			
Type of Report				
Regularly Scheduled Filing.				
Amended Filing. This amends previous report filed on (date) Submit changes or new information ONLY				
	a.			
Termination Report. (Termination Reports MUST Have a Monetary Balance of Zero in Line 5)				
Check this box if this Report Contains Electioneering Communications Information				
Reporting Period Covered: 2(8)2015 Through 330 2015				
Date Declared Total Spending (if applicable) [Art. XXVIII, Sec. 4(1)]				
Totals Detailed Summary Pag	re			
1 Funds on Hand at the Beginning of Reporting Period (monetary only) \$ 154.27	,			
2 Total Monetary Contributions (line 11) \$ \(\begin{align*} \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \				
3 Total of Monetary Contributions & Beginning Amount (line 1 + line 2) \$ 3006.30				
4 Total Monetary Expenditures (line 19) \$ 3006.30				
5 Funds on Hand at the End of Reporting Period (monetary) (line 3 – line 4) \$				
The appropriate officer (City Clerk) shall impose a penalty of \$50 per day for each day that a report is filed late. (Littleton Municipal Code 1-7-7)				
Authorization (Must be completed by either the Registered Agent OR the Candidate): I hereby certify and declare, under				
penalty of perjury, that to the best of my knowledge or belief all contributions received during this reporting period,				
including any contributions received in the form of membership dues transferred by a membership organization, are from				
permissible sources.				
Print Registered Agent's Name: Seph M rull 0				
Registered Agent's Signature: M. M. Mayillo Date: 3 30/15	5			
Print Candidate Name:				
Candidates Signature: Date:				

DETAILED SUMMARY

Full Name of Committee/Person: Your Littleton - Your Vote

Through 3 30 15 2/18/ **Current Reporting Period:**

Funds on hand at the beginning of reporting period (Monetary Only)		\$ 1154.27
6	Itemized Contributions \$20 or More [C.R.S. 1-45-108(1)(a)] (Please list on Schedule "A")	\$ 954.05
7	Total of Non-Itemized Contributions (Contributions of \$19.99 and Less)	\$ 897.98
8	Loans Received (Please list on Schedule "C")	\$
9	Total of Other Receipts (Interest, Dividends, etc.)	\$
10	Returned Expenditures (from recipient) (Please list on Schedule "D")	\$
11	Total Monetary Contributions (Total of lines 6 through 10)	\$ 185203
12	Total Non-Monetary Contributions (From Statement of Non-Monetary Contributions)	\$ 500000
13	Total Contributions (Line 11 + line 12)	\$ 5000°° \$ 6852°3 \$ 248077
14	Itemized Expenditures \$20 or More [C.R.S. 1-45-108(1)(a)] (Please list on Schedule "B")	\$ 248077
15	Total of Non-Itemized Expenditures (Expenditures of \$19.99 or Less)	\$
16	Loan Repayments Made (Please list on Schedule "C")	\$ 525.53
17	Returned Contributions (To donor) (Please list on Schedule "D")	\$
18	Total Coordinated Non-Monetary Expenditures (Candidate/Candidate Committee & Political Parties only)	\$
19	Total Monetary Expenditures (Total of lines 14 through 17)	\$ 3006.30 \$ 3006.30
20	Total Spending (Line 18 + line 19)	\$ 300630

Schedule A – Itemized Contributions Statement (\$20 or more) [C.R.S. 1-45-108(1)(a)]

Full Name of Committee/Person: Your Littleton Your Vote

WARNING: Please read the instruction page for Schedule "A" before completing!

PLEASE PRINT	TYPE
1. Date Accepted 2 196 2. Contribution Amt. \$ 2000 3. Aggregate Amt. * \$ Check box if Electioneering Communication	4. Name (Last, First): MINNIS Robert 5. Address: 457 W Brianwood 6. City/State/Zip: Littleton CO BO120 7. Description: Check 8. Employer (if applicable, mandatory): retired 9. Occupation (if applicable, mandatory): retired
1. Date Accepted 2 20 15 2. Contribution Amt. \$ 10000 3. Aggregate Amt. * \$ 40000 Check box if Electioneering Communication	4. Name (Last, First): Shone Gloria 5. Address: 7976 S Datura Cir W 6. City/State/Zip: Littleton (O 80120 7. Description: Meck 8. Employer (if applicable, mandatory): Anadar to 9. Occupation (if applicable, mandatory):
1. Date Accepted 2 23 5 2. Contribution Amt. \$ 35000 3. Aggregate Amt. * \$ Check box if Electioneering Communication	4. Name (Last, First): Bruns Don 5. Address: 1332 S (ostilla 6. City/State/Zip: Lettern Co 80120 7. Description:
1. Date Accepted 3 10 15 2. Contribution Amt. \$ 250°0 3. Aggregate Amt. * \$ Check box if Electioneering Communication	4. Name (Last, First): Clark Doug 5. Address: 2464 S Houston Waring Cr 6. City/State/Zip: Helton CO 80120 7. Description: Cle 8. Employer (if applicable, mandatory): Self Umployed 9. Occupation (if applicable, mandatory): Consultant

* For contribution limits within a committee's election cycle or contribution cycle, please refer to the following Colorado Constitutional cites: Candidate Committee Art. XXVIII, Sec. 2(6); Political Party Art. XXVIII, Sec. 3(3); Political Committee Art. XXVIII, Sec 3(5); Small Donor Committee Art. XXVIII, Sec. 2(14).

Schedule A – Itemized Contributions Statement (\$20 or more) [C.R.S. 1-45-108(1)(a)]

Full Name of Committee/Person: Your Watteton Your Vote WARNING: Please read the instruction page for Schedule "A" before completing! PLEASE PRINT/TYPE 1. Date Accepted 4. Name (Last, First): Brzeczek 5. Address: 2000 W Arapahoe Kd 2. Contribution Amt. \$ 6. City/State/Zip: Wttleton 3. Aggregate Amt. * 7. Description: Cush 8. Employer (if applicable, mandatory): Self employed Check box if 9. Occupation (if applicable, mandatory): Seamstress Electioneering Communication 1. Date Accepted 4. Name (Last, First): 5. Address: 2. Contribution Amt. 6. City/State/Zip: 3. Aggregate Amt. * 7. Description: 8. Employer (if applicable, mandatory): ☐ Check box if 9. Occupation (if applicable, mandatory): Electioneering Communication 1. Date Accepted 4. Name (Last, First): 5. Address: 2. Contribution Amt. \$ 6. City/State/Zip: 3. Aggregate Amt. * 7. Description: 8. Employer (if applicable, mandatory): ☐ Check box if 9. Occupation (if applicable, mandatory): Electioneering Communication 1. Date Accepted 4. Name (Last, First): 5. Address: 2. Contribution Amt. 6. City/State/Zip: 3. Aggregate Amt. * 7. Description: 8. Employer (if applicable, mandatory): Check box if Electioneering 9. Occupation (if applicable, mandatory):

* For contribution limits within a committee's election cycle or contribution cycle, please refer to the following Colorado Constitutional cites: Candidate Committee Art. XXVIII, Sec. 2(6); Political Party Art. XXVIII, Sec. 3(3); Political Committee Art. XXVIII, Sec 3(5); Small Donor Committee Art.

Communication

XXVIII, Sec. 2(14).

Colorado Secretary of State Form Rev. 04/13

Schedule B - Itemized Expenditures Statement (\$20 or more) [1-45-108(1)(a), C.R.S.]

Full Name of Committee/Person: Your Littleton Your Vote					
PLEASE PRINT/TYPE					
1. Date Expended	4. Name: Harson Bros Printing				
2 24 15					
2. Amount	5. Address: 2439 W Main St				
\$ 434.37	6. City/State/Zip: WHLeton CO 80120				
3. Recipient is (optional):					
Committee Non-Committee	7. Purpose of Expenditure: Printing				
	☐ Check box if Electioneering Communication				
1. Date Expended	4. Name: Carol A Brzeczek				
3/8/15					
2. Amount	5. Address: 2000 W Arapahoe Xd				
\$ 1115.40	6. City/State/Zip: Littleton CO 80120				
3.Recipient is (optional): Committee	7. Purpose of Expenditure: Printing- remburse ment				
☐ Non-Committee	☐ Check box if Electioneering Communication				
1. Date Expended	4. Name: Carol A Brzeczek				
3 00 15 2. Amount	5. Address 2000 W Arapahoe Rd				
\$ 88100					
3.Recipient is (optional):	6. City/State/Zip: WHISton CO 80120				
Committee	7. Purpose of Expenditure: velm bur se ment - postage				
☐ Non-Committee	☐ Check box if Electioneering Communication				
1 Date Evnended					
3/8/15	4. Name: Joseph Barrentine				
2. Amount	5. Address: 4160 S Pearl S+				
\$ 50.00	6. City/State/Zip: Englewood CO 80113				
3.Recipient is (optional):	7. Purpose of Expenditure: CIVCULATO ?				
Committee Non-Committee					
Check box if Electioneering Communication					
Date Expended	4. Name:				
2. A					
2. Amount	5. Address:				
\$ 2 Paginiant is (antiquel):	6. City/State/Zip:				
3.Recipient is (optional): Committee	7. Purpose of Expenditure:				
☐ Non-Committee					
Check box if Electioneering Communication					

Colorado Secretary of State Form Rev. 04/13

Schedule C - Loans

Full Name of Committee/Person: 40ur Littleton- Your Vote

LOANS - Loans Owed by the Committee

(Use a separate schedule for each loan. This form is for line item 8 and 16 of the Detailed Summary Report.)
[No information copied from such reports shall be sold or used by any person for the purpose of soliciting contributions or for any commercial purpose. [Art. XXVIII, Sec. 9(e)] Notwithstanding any other section of this article to the contrary, a candidate's candidate committee may receive a loan from a financial institution organized under state or federal law if the loan bears the usual and customary interest rate, is made on a basis that assures repayment, is evidenced by a written instrument, and is subject to a due date or amortization schedule [Art. XXVIII, Sec. 3(8)]

LOAN SOURCE	
Name (Last, First or Institution): Brzeczek, Caro	
Address: 2000 W Arapahoe Rd	
City/State/Zip: Littleton (0 80120	
Original Amount of Loan: \$ 525.53 Interest Rate:	
Loan Amount Received This Reporting Period: \$ Total of All Loans This Reporting Period: \$ Period: \$ (Place on line 8 of Detailed Summary Repo	ort)
Principal Amount Paid This Reporting Period: \$ 525.53	
Interest Amount Paid This Reporting Period: \$	
Amount Repaid This Reporting Period: \$ 525.53 (Amount Repaid is sum of Principal & Interest entered on Detail Summary) Total Repayments Made: \$ 526.53 (Sum of Schedule C pages, Place on line 16 of Detailed Summary))
Outstanding Balance: \$	
TERMS OF LOAN: 2 3 5 Date Loan Received Due Date for Final Payment	
· · · · · · · · · · · · · · · · · · ·	

LIST ALL ENDORSERS OR GUARANTORS OF THIS LOAN

Full Name	Address, City, State, Zip	Amount Guaranteed

Statement of Non-Monetary Contributions[Art. XXVIII, Sec. 2(5)(a)(II)(III) & Sec. 5(3) & 1-45-108(1), C.R.S.]

Full Name of Committee/Person: Your Littleton Your Vote 4. Name (Last, First): Independence Inst 5. Address: 727 & 16th Ave 1. Date Provided 2. Fair Market Value 6. City/State/Zip: Denver CO 80203 \$ 7. Description: <u>Social media</u> 3. Aggregate Amt. 8. Employer (if applicable, mandatory): Check box if 9. Occupation (if applicable, mandatory): Electioneering Communication 10. Check box if Coordinated with a Candidate/Candidate Committee or Political Party. * 1. Date Provided 4. Name (Last, First): 5. Address: 2. Fair Market Value 6. City/State/Zip: \$ 7. Description: 3. Aggregate Amt. 8. Employer (if applicable, mandatory): Check box if 9. Occupation (if applicable, mandatory): Electioneering Communication 10. Check box if Coordinated with a Candidate/Candidate Committee or Political Party. * 1. Date Provided 4. Name (Last, First): 5. Address: 2. Fair Market Value 6. City/State/Zip: 7. Description: 3. Aggregate Amt. 8. Employer (if applicable, mandatory): ☐ Check box if 9. Occupation (if applicable, mandatory): Electioneering Communication 10. Check box if Coordinated with a Candidate/Candidate Committee or Political Party. *

^{*} Note: If coordinated, then contribution must also be reported as a non-monetary expenditure on Detailed Summary. Art. XXVIII, Sec. 2(9) states: "... Expenditures that are controlled by or coordinated with a candidate or candidate's agent are deemed to be both contributions by the maker of the expenditures, and expenditures by the candidate committee."